PAGE 1 / 8

**FEC** 

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3A	For Other	Than An Auth	norized Commi	ttee		Office Use Only	
NAME OF COMMITTEE (in fu	TYPE OR	PRINT ▼	Example: If ty over the lines.		12FE4M	5	
CT WORKING F	FAMILIES FED	ERAL PAC D	D/B/A TAKE B	ACK CON	GRESS C	T	
<u> </u>							
ADDRESS (number and	street) SUITE 2	DR STREET  10				1 1 1 1 1	
Check if differ than previousl reported. (ACC	y HARTFO	ORD			СТ	06106	
2. <b>FEC IDENTIFICA</b>	TION NUMBER ▼	CIT	Y <b>A</b>		STATE A	ZIP CO	DE A
C C00428649			S THIS EPORT	NEW (N) <b>OR</b>	AN (A)	IENDED	
4. TYPE OF REPO (Choose One)	Rep	oort On:	20 (M2)	May 20 (M5) Jun 20 (M6)		20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Repo	orts:	H	20 (M4)	Jul 20 (M7)		20 (M10)	(Non-Election Year Only)  Jan 31 (YE)
April 15 Quarterly	Report (Q1) (c)	12-Day	Primary (1				Runoff (12R)
July 15 Quarterly	Report (Q2)	PRE-Election Report for the:	Convention		Special (		ridion (1211)
October 1 Quarterly	5 Report (Q3)					_	
January 3 Year-End	1 Report (YE)	Election	n on 11	06	2018	in the State o	of CT
July 31 M Report (N Year Only	on-election	30-Day  POST-Election  Report for the:	General (3	0G)	Runoff (3	60R)	Special (30S)
Terminatio (TER)	n Report	Election	n on	/ D = D /	Y = Y = Y = Y	in the State o	of
5. Covering Period	10 01		through	10_	/ D D /	2018	
I certify that I have exa		and to the best of Donna, , ,	my knowledge and	d belief it is tru	ue, correct and	d complete.	
Type or Print Name of	Treasurer	Domia, , ,					
Signature of Treasurer	Becotte, Donna, , ,		[Electronico	ally Filed]	Date 10	25	2018
NOTE: Submission of fal	se, erroneous, or inc	omplete information	n may subject the p	erson signing tl	nis Report to th	ne penalties of 52	U.S.C. § 30109
Office Use Only						FEC FOR Rev. 05/2	

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
(a) Cash on Hand January 1,  2018		53991.6		
(b) Cash on Hand at  Beginning of Reporting Period	66987.87			
(c) Total Receipts (from Line 19)	12.00	18480.0		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66999.87	72471.6		
Total Disbursements (from Line 31)	8305.62	13777.3		
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58694.25	58694.2		
Debts and Obligations Owed <b>TO</b> he Committee (Itemize all on Schedule C and/or Schedule D)	0.00			
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00			

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

# CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT

R	eport Covering the Period: From:		10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees						
	(i) Itemized (use Schedule A)	0.00	5860.00				
	(ii) Unitemized	12.00	120.00				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	12.00	5980.00				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)	0.00	12500.00				
10	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	12.00	18480.00				
12.	Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received  Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00				
16.	Refunds of Contributions Made to Federal Candidates and Other						
17.	Political Committees Other Federal Receipts	0.00	0.00				
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00				
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00				
	(b) Levin Funds (from Schedule H5)	0.00	0.00				
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	12.00	18480.00				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	12.00	18480.00				

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
	Operating Expenditures:	Total Tills Fellou	Calellual Teal-10-Date			
()	Allocated Federal/Non-Federal     Activity (from Schedule H4)					
	(i) Federal Share	0.00	0.00			
	(ii) Non-Federal Share	0.00	0.00			
(1	b) Other Federal Operating	242.89	5714.63			
	Expenditures c) Total Operating Expenditures	242.09	3714.03			
(1	c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	242.89	5714.63			
Т	Fransfers to Affiliated/Other Party	7 7				
C	Committees	0.00	0.00			
	Contributions to Federal Candidates/Committees	7 7 7				
а	and Other Political Committees	0.00	0.00			
	ndependent Expenditures	0.00	0.00			
C	use Schedule E) Coordinated Party Expenditures	0.00	0.00			
(	52 U.S.C. § 30116(d)) use Schedule F)	8062.73	8062.73			
(	do conodio i /	4 4	8002.73			
L	oan Repayments Made	0.00	0.00			
		4 4				
Ļ	oans Made	0.00	0.00			
	Refunds of Contributions To: a) Individuals/Persons Other					
`	Than Political Committees	0.00	0.00			
,						
`.	b) Political Party Committees c) Other Political Committees	0.00	0.00			
(1	c) Other Political Committees (such as PACs)	0.00	0.00			
		0.00	0.00			
(1	d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00			
	(ada Emos 20(a), (b), and (o))	0.00	0.00			
C	Other Disbursements (Including					
Ν	Non-Federal Donations)	0.00	0.00			
_			4 4			
	Federal Election Activity (52 U.S.C. § 30101(2	(0))				
(;	<ul> <li>a) Allocated Federal Election Activity (from Schedule H6)</li> </ul>					
	(i) Federal Share	0.00	0.00			
	(i) I cucial chare	0.00	0.00			
	(ii) "Levin" Share	0.00	0.00			
(1	b) Federal Election Activity Paid	4 4				
	Entirely With Federal Funds	0.00	0.00			
(	c) Total Federal Election Activity (add	4-14-14-14-14-14-14-14-14-14-14-14-14-14	4 4			
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
	Total Disbursements (add Lines 21(c), 22,					
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8305.62	13777.36			
_	Total Federal Disbursements	T T T T T T T T T T T T T T T T T T T				
	subtract Line 21(a)(ii) and Line 30(a)(ii)					
	rom Line 31)	9205 69				
		8305.62	13777.36			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	or disbursements	Page 5			
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12.00	18480.00			
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12.00	18480.00			
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	242.89	5714.63			
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
38. Net Operating Expenditures (subtract Line 37 from Line 36)	242.89	5714.63			

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Use separate schedule(s) to cach category of the cach category (check only one) to be all cach category of the cach category (check only one) to be all cach category (check only one) to be all cach cach category (check only one) (check one)	SCHEDULE B (FEC Form 3X)			EOD LINE	NUMBER: PAGE 6 OF 8				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions for much committee.  NAME OF COMMITTEE (in Full)  CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT  Full Name (Last, First, Middle Initial)  A. Vincently, Cristina, , ,   Mailing Address 55 Ironworks Road  City  State  Office Sought: House  Office Sought: House  Office Sought: House  Office Sought: House  Office Sought: District  Full Name (Last, First, Middle Initial)  B.   Mailing Address  City  State  District:  Full Name (Last, First, Middle Initial)  C.   Mailing Address  City  State: Disbursement  Category' Type  Office Sought: House  District:  Full Name (Last, First, Middle Initial)  C.   Mailing Address  City  State: Disbursement  Category' Type  Office Sought: House  District:  Full Name (Last, First, Middle Initial)  C.   Mailing Address  City  State: Disbursement  Category' Type  Office Sought: House  District:  Full Name (Last, First, Middle Initial)  C.   Mailing Address  City  State: Disbursement  Category' Type  Office Sought: House  District:  Full Name (Last, First, Middle Initial)  C.   Mailing Address  City  State: Disbursement  Candidate Name  Category' Type  Office Sought: House  District:  FEC Identification Number  Category' Type  Amount of Each Disbursement this Period  Office Sought: House  Office	•			\ <b>I</b> -	NOMBER.				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pull)  CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT  Full Name (Last, First, Middle Initial)  A. Vincently, Cristina, , ,  Mailing Address 55 fromworks Road  City State Zip Code Category/ Type  Find Name (Last, First, Middle Initial)  Candidate Name  City State Zip Code City State Zip Code  City State	THE PRODUCTION OF THE PROPERTY			1 ` <u> </u>					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pull)  CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT  Full Name (Last, First, Middle Initial)  A. Vincently, Cristina, , ,  Mailing Address 55 Ironworks Road  City State Zip Code CT Question Code CT Question State Category/ Type  Find Name (Last, First, Middle Initial)  B. City State Zip Code Code CT Question Code CT Question State Code CT Question CT Questio		Detailed	Cummary rage	28a	28b 28c 29 30b				
NAME OF COMMITTEE (In Full) CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT  A. Vincenty, Cristina, Mailing Address 55 Ironworks Road  City Millingworth Purpose of Disbursement mileager embursement Candidate Name  Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address  City State Disbursement For: Senate Primary General Office Sought: FEC Identification Number  Category/ Type  Memo Item  Date of Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction 10 : S8218.464  Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transaction Number  C. Amount of Each Disbursement this Period  Transact									
CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT  Full Name (Last, First, Middle Initial)  City State Zip Code Carlegory/ Nipe  Office Sought: House President President Other (specify)  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Zip Code Category/ Other (specify)  Full Name (Last, First, Middle Initial)  B. Date of Disbursement  To 002  Transaction ID : 82218.4846  Amount of Each Disbursement his Period  Transaction ID : 82218.4846  Memo Item  Date of Disbursement For:  Category/ Type  Office Sought: House President  Candidate Name  Category/ Office Sought: President  State: District:  Full Name (Last, First, Middle Initial)  C. Amount of Each Disbursement this Period  Tell Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President  Candidate Name  Category/ Type  Office Sought: House President  State: District:  State: District:  State: District: Memo Item  State: Memo Item  Substrotal of Disbursement this Period		ame and add	dress of any politi	ical committee to	solicit contributions from such committee.				
Full Name (Last, First, Middle Initial)  A Vincenty, Cristina, , ,  Mailing Address 55 Ironworks Road  City State Zip Code Oct 10			D/D/A TAI	E DAOK 00	NODEOO OT				
A Vincenty, Cristina, ,   Date of Disbursement   C   C   C   C   C   C   C   C   C	/ CT WORKING FAMILIES FEDER	RAL PAC	D/B/A TAK	E BACK CC	ONGRESS CT				
A Vincenty, Cristina, ,   Mailing Address 65 ironworks Road  City	Full Name (Last. First. Middle Initial)								
Mailing Address 55 fromworks Road					M   M / D   D / Y   Y   Y   Y				
City Kilingworth City City City City City City City City									
Killingworth Purpose of Disbursement mileage reimbursement Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Disbursement For: Senate Primary General Office Sought: House President State: District:  Category/ Type  Date of Disbursement  Candidate Name  Office Sought: House Primary General Office Sought: House President Office (specify)  Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  District: District: Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  District: Full Name (Last, First, Middle Initial)  Category/ Type  The Category/ Type  The Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  FEC Identification Number  Category/ Type  The Ca	Mailing Address 55 Ironworks Road								
Killingworth Purpose of Disbursement mileage reimbursement Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Disbursement For: Senate Primary General Office Sought: House President State: District:  Category/ Type  Date of Disbursement  Candidate Name  Office Sought: House Primary General Office Sought: House President Office (specify)  Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  District: District: Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  District: Full Name (Last, First, Middle Initial)  Category/ Type  The Category/ Type  The Category/ Type  FEC Identification Number  Category/ Type  The Category/ Type  FEC Identification Number  Category/ Type  The Ca	City	State	Zin Code						
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Transaction ID: SB21B.4646 Amount of Each Disbursement this Period  Office Sought:	Purpose of Disbursement				C				
Candidate Name  Office Sought: House Senate President State: District: Other (specify) V  Full Name (Last, First, Middle Initial)  B. Sanate President State: District: Other (specify) V  State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial)  C. Sanate President State Zip Code  FEC Identification Number  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President State: District: Other (specify) V  State Zip Code  FEC Identification Number  Category/ Type  Office Sought: House Disbursement For: Senate President General President State: District: Other (specify) V  State Disbursement From Memo Item  Substate: District: Memo Item				Category/					
Office Sought:	Candidate Name								
Senate President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Category/ Office Sought: House President Primary General Primary General  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Category/	Office Sought: House Dishure	amant Fari		Туре	242.89				
State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Zip Code Purpose of Disbursement  Candidate Name		_	General		242.05				
State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City					□ Mama Hagy				
Malling Address  City State Zip Code FEC Identification Number  Cardidate Name  Office Sought: House Senate Primary General Other (specify)  Malling Address  City State Zip Code FEC Identification Number  Category/ Type  Office Sought: House Primary General Other (specify)  Malling Address  City State Zip Code FEC Identification Number  Category/ Type  Tell Name (Last, First, Middle Initial)  City State Zip Code FEC Identification Number  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate Primary General Other (specify) ▼  State: Disbursement For: Memo Item  State: District: Memo Item  Substortal of Disbursement This Page (optional) ■ Memo Item	State: District:				Memo item				
City State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Senate President Other (specify)  State: District:  C. Amount of Each Disbursement this Period  Memo Item  Date of Disbursement Tor:  Category/ Type  Other (specify)  Date of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General  Office Sought: State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General  Office Sought: House Senate Primary General  Office Sought: House Senate Primary General  Other (specify) Memo Item  Substrotal of Disbursement This Page (optional)									
City Purpose of Disbursement  Candidate Name  Office Sought:    House	B.				Date of Disbursement				
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Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House   Disbursement For:   Memo Item  Candidate Name   Disbursement For:   Memo Item  Date of Disbursement  City   State   Zip Code   FEC Identification Number  City   State   Zip Code   FEC Identification Number   Candidate Name   Category/ Type   Catego	Mailing Address	alling Address							
Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Senate Primary General Other (specify)   State: District:  Disbursement For: General Other (specify)   Memo Item  Substitute Tipe Memo Item	City		EEC Identification Number						
Candidate Name    Category/ Type									
Office Sought: House Senate Primary General Other (specify)  State: District: Memo Item  Date of Disbursement  Category/ Type  Memo Item  Date of Disbursement  City State Zip Code Purpose of Disbursement  Candidate Name  Candidate Name  Disbursement For: Category/ Type  Office Sought: House Disbursement For: General Primary General Other (specify) Memo Item  State: District: Memo Item  State Zip Code FEC Identification Number  Category/ Type  Memo Item  Suppose of Disbursement This Page (optional) Memo Item  Suppose of Disbursement This Page (optional) Memo Item	Purpose of Disbursement								
Office Sought: House Senate President State: District: Memo Item    Purpose of Disbursement For: Senate Primary General Disbursement   Date of Date o	Candidate Name								
Office Sought:	Canadato Namo								
State: District: Other (specify)  Date of Disbursement  Mailing Address  City  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District: Memo Item  Memo Item  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Other (specify)   Memo Item  242.89	Office Sought: House Disburs	ement For:		- 7/6-5					
State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  State  Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Substoctal of Disbursements This Page (optional)		Primary	General		Memo Item				
Full Name (Last, First, Middle Initial)  Date of Disbursement  City  Purpose of Disbursement  Candidate Name  Office Sought:  House Senate President State:  District:  Date of Disbursement  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item  242.89		Other (spe	ecify)						
City State Zip Code FEC Identification Number  Candidate Name Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Mailing Address  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item  242.89									
Mailing Address  City State Zip Code FEC Identification Number  Purpose of Disbursement  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Subtotal of Disbursements This Page (optional)					Data of Dichurcoment				
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Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Substotal of Disbursements This Page (optional)	Mailing Address				M = M / D = D / Y = Y = Y = Y				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Substotal of Disbursements This Page (optional)									
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substrict: Memo Item  Amount of Each Disbursement this Period  Memo Item  242.89	City	City State Zip Code							
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substrict: Memo Item  Amount of Each Disbursement this Period  Memo Item  242.89	Purpose of Disbursement	Purpose of Disbursement							
Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  Substrict: Memo Item  242.89									
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Substrict: Memo Item  242.89	Candidate Name			Category/	Amount of Each Disbursement this Period				
Senate Primary General Other (specify) ▼  State: District: Memo Item  SUBTOTAL of Disbursements This Page (optional)									
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342 PD	<u> </u>								
242.90	SUBTOTAL of Disbursements This Page (optional)	)			242.89				
	TOTAL This Period (last page this line number on				242.89				

# SCHEDULE F (FEC Form 3X)

### ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE 7 OF

(To be used only by Political Committees in the General Election)  FOR LINE 25 OF FORM 3X								
NAME OF COMMITTEE (In Full)								
CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT								
Has your committee been designated to make Full Name of Subordinate Committee								
coordinated expenditures by a political party committee?  YES X NO								
If YES, name the designating committee:								
		City					State	ZIP Code
Full Name (Last, First, Middle Initial) of Each F	avee			Mer	no Item	Purpose of	Expenditure	
CCM & Co.							rds, lit, genera	I 006 Category/
Mailing Address 1022 Boulevard #339						Date		Туре
City	State		Zip Code			M - M	/ D D /	Y Y Y Y Y
West Hartford	СТ	-	06119			10	04	2018
Name of Federal Candidate Supported Office	Sough	nt: 🗶	House	State:	CT	Amount		
HAYES, JAHANA, , ,			Senate	District:	05			2005.70
			Presidential				7	2205.70
Aggregate General Election			220	5.70				
Expenditure for this Candidate	ransac	tion I	D : SF.4644	* -				
Full Name (Last, First, Middle Initial) of Each F				☐ Mer	no Item	Purpose of	Expenditure	
CCM & Co.	,					palm ca	rds, campaign	lit, 006
COIVI & CO.						general	survey	Category/
Mailing Address 1022 Boulevard #339								Туре
Ott	01-1-		7: 0 1 -			Date		
City West Hartford	State		Zip Code			10	04	2018
N	Sough	06119 ht: House   State: CT						
MURPHY, CHRISTOPHER S MR, ,	oougi	". <b>x</b>	_			Amount		
,		Presidential			1357.03			
Aggregate General Election	-		135	7.03			7	4
Expenditure for this Candidate Transaction ID:	SF 464	5	7	-				
Full Name (Last, First, Middle Initial) of Each F				Mer	no Item	Purpose of	Expenditure	
TruCorps - Eastern Region	,						reimbursement	004
								Category/
Mailing Address 228 Park Avenue South - 2882	2							Туре
			T			Date		
City New York	State NY		Zip Code			10	16	2018
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sough	nt: 🗶	House	State:	СТ			
DELAURO, ROSA L, , ,	Sougi	π. 👗	Senate	District:	03	Amount		
			Presidential	-		l		125.00
Aggregate General Election	_	-					7	4 4
Expenditure for this Candidate	-		125	5.00				
Trans	action	ID : S						
SUBTOTAL of Expenditures This Page (optional)							75 1 1	3687.73
TOTAL This Period (last page this line number on	ıly)					1		

# SCHEDULE F (FEC Form 3X)

# ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(To be used only by Political Committees in the General Election)

PAGE 8 OF 8

•	oc used only	, by PC	Jiilicai Cuilli	militees in the Gene	siai Licciioi	''   ' '' '		
AME OF COMMITTEE (In Full)			>/D/A T *	VE DAO! ( 00	NODEO	0.07		
CT WORKING FAMILIES FE	DERAL F	AC [	J/B/A TA	KE BACK CO	NGRES	SCI		
as your committee been designated to mal	ke	Full N	Name of Subo	ordinate Committee				
pordinated expenditures by a political party	committee?							
YES X NO			ng Address					
YES, name the designating committee:								
		State	ZIP Co	nd o				
		State	ZIP CC	oue				
Full Name (Last, First, Middle Initial) of	Purnose of	Expenditure						
		eimbursement	:	001				
TruCorps - Eastern Region								Category/
Mailing Address 228 Park Avenue South	า - 28822				1			Type
					Date			
City	State		Zip Code		10	16		2018
New York	N'		10003					.010
Name of Federal Candidate Supported	Office Soug		House	State: CT	Amount			
MURPHY, CHRISTOPHER S MR, ,		X	Senate Presidential	District: 00				1000.00
,			Presidential	<u> </u>		-g- 1 1	7	1000.00
Aggregate General Election Expenditure for this Candidate ▶			2357	.03				
Experialiture for triis Carididate	Transa	ction ID	) : SF.4649	-				
Full Name (Last, First, Middle Initial) of				Memo Item	Purpose of	Expenditure		
TruCorps - Eastern Re	aion				payroll r	eimbursement	t	001
Tracerpo Eastern No.	9.011							Category/
Mailing Address 228 Park Avenue	e South - 288	22						Туре
City	Ctoto		Zin Codo		Date			
City New York	State		Zip Code 10003		10	16		018
Name of Federal Candidate Supported	Office Soug	ht: 🗶		State: CT				
HAYES, JAHANA, , ,	emoc coug		Senate	District: 05	Amount			
,,,,			Presidential		Ш.,			3375.00
Aggregate General Election						7	7	-46-
Expenditure for this Candidate			5580	.70				
	n ID : SF.465	50						
Full Name (Last, First, Middle Initial) of	Each Payee			☐ Memo Item	Purpose of	Expenditure		· · · ·
Mailing Address					-			Category/ Type
Mailing Address					Date			1 3 PC
City	State		Zip Code		Date M M	/ D D /	Y	YY
							L.	
Name of Federal Candidate Supported	Office Soug	ht:	House	State:	Amount			
			Senate	District:	, unount			
			Presidential		<u> </u>	<u> </u>	7	45
Aggregate General Election							,	
Expenditure for this Candidate			<del>_</del>					
I								
SUBTOTAL of Expenditures This Page (opt	tional)							1375.00
ODITION CAPENGINGS THIS Page (Opi						7	7	
TOTAL This Period (last page this line num	nber only)						{	8062.73
, . <b>.</b>	-,					7	J	